Case 17-3809	94 Doc 1	Filed 12/27/17 Document	Entered Page 1	d 12/27/17 14:25:48 of 55	Desc Main
Fill in this information to iden	itify your case:		9-	UNITED STATES BANKRUP NORTHERN DISTRICT OF	TCY COURT
United States Bankruptcy Court	t for the:			comments aminifi At	eriani?
Northern District of Illinois				DEC 27 201	
Case number (if known):		Chapter you are filir Chapter 7 Chapter 11 Chapter 12 Chapter 13	ng under:	JEFFREY P. ALLSTEAD INTAKE 3	OT, CLERK Check if this is an amended filing
Official Form 101					
Voluntary Pet	ition for	Individua	is Fili	ng for Bankri	IPÉCV 12/15
Debtor 2 to distinguish between same person must be Debtor 1 in Be as complete and accurate as information. If more space is ne (if known). Answer every question Part 1: Identify Yourself	possible. If two needed, attach a sen	narried neonle are filin	a taaathar h	ath are assetted as a second of	
	About Debtor 1			About Debtor 2 (Spous	e Only in a Joint Caso):
1. Your full name					o omy in a bonit case).
Write the name that is on your government-issued picture identification (for example, your driver's license or	Heather First name Lashea			First name	
passport).	Middle name Smith			Middle name	
Bring your picture identification to your meeting	Last name			Last name	
with the trustee.	Suffix (Sr., Jr., If, III)		Suffix (Sr., Jr., II, III)	
	tertitis er ja eretitis er er general ander general general general general general general general general ge		- 121-11-15 (1-12-12-12-12-12-12-12-12-12-12-12-12-12		
2. All other names you have used in the last 8	Heather				
years	First name L.			First name	
Include your married or maiden names.	Middle name SMITH LANG	as .		Middle name	
	Last name			Last name	
	Heather				
	First name			First name	
	Middle name			Middle name	
	Langs Last name			Last name	
				Last Haffle	
3. Only the last 4 digits of your Social Security	xxx - xx	8 4 3 7		xxx - xx -	
number or federal Individual Taxpayer	OR			OR	
Identification number (ITIN)	9 xx - xx			9 xx - xx	
Official Form 101	Volunta	ry Petition for Individu	als Filing for	Bankruptcy	page 1

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Debtor 1	Heather L	Smith Name Last Name	···		Ca	ase number (if known)	
	error terror company construction of the second	***************************************		*************			
		About Debtor 1:				About Debtor 2 (Spouse Only in a Joint Case):	
and E	ousiness names imployer ification Numbers you have used in	I have not used any bu	siness names	or EINs.		☐ I have not used any business names or EINs.	
the la	st 8 years e trade names and	Business name				Business name	-
doing i	business as names	Business name		-A		Business name	rêm ana
		EIN				EIN	
		EIN				EIN	
5. Where	you live	e terreta de mentra en el en estado como propor en como en	ek a manarak a ayan ya masasa		are researched	If Debtor 2 lives at a different address:	
		1817 S. Harvard Aver	nue		···	Number Street	
						Number Street	
		Chicago	IL	60628	•••		
		City Cook	State	ZIP Code	-	City State ZIP Cod	e
		County		######################################	-	County	
		If your mailing address is above, fill it in here. Note that any notices to you at this ma	hat the court w	the one ill send		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number Street			-	Number Street	
		P.O. Box		**************************************	-	P.O. Box	
		City	State	ZIP Code	•	City State ZIP Code)
. Why yo	ou are choosing	Check one:				Check one:	
<i>this dis</i> bankru	strict to file for ptcy	Over the last 180 days be I have lived in this district other district.	efore filing this I longer than in	petition, any		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
		I have another reason. E. (See 28 U.S.C. § 1408.)	xplain.			I have another reason. Explain. (See 28 U.S.C. § 1408.)	
		All the second s					-
							-

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į	Debtor 1	Heather First Name	Middle N	lame	Smi Last N		***************************************		Case number	(if known)		
	Part 2:	Tell the Cour	rt Abo	out Your	Bankr	uptcy Case						
7	Bankru	apter of the ptcy Code ye	ou	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
are choosing to file under					Chapter 7							
				☐ Ch	apter 1	1						
				☐ Ch	apter 1:	2						
				Ch Ch	apter 1	3						
8.	. How yo	u will pay the	e fee	you sub with	rself, yomitting a pre-	ou may pay w your paymen printed addres	rith cash, cas t on your beh ss.	v you i hier's alf, yo	may pay. Typica check, or money our attorney may	neck with the clerk's office in your illy, if you are paying the fee y order. If your attorney is pay with a credit card or check		
				☐ I ne	ed to p	oay the fee in	installment	s. If yo	ou choose this o	ption, sign and attach the ents (Official Form 103A).		
				I red By I less pay	quest t aw, a ju than 1 the fee	hat my fee be udge may, but 50% of the off in installment	waived (Yo is not require ficial poverty ts). If you cho	u may ed to, line the	request this op waive your fee, at applies to you	tion only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.		
9.	Have you	ı filed for										
٠.	bankrup	cy within the	e	22 No								
	last 8 yea	ars?		₩ Yes.	District			When	MM / DD / YYYY	Case number		
					District	***************************************		When		Case number		
					District			When				
							***************************************	A ALICHS	MM / DD / YYYY	Case number		
0.	Are any b	ankruptcy		☑ No								
	cases per filed by a	nding or bein spouse who	ng Lis		Debtor					Relationship to you		
	not filing	this case wi	th		District			₩hen		Case number, if known		
	partner, caffiliate?	r by an							MM / DD / YYYY			
					Debtor		4-	***************************************		Relationship to you		
					District		\	V hen	MM / DD / YYYY	Case number, if known		
									WINT DD / YYYY			
f. !	Do you re residence	nt your ?		Yes.	Go to fir Has you residend	ır landlord obtai	ned an evictior	ı judgn	nent against you a	nd do you want to stay in your		
						Go to line 12.						
					U Yes. this ∣	Fill out <i>Initial S</i> bankruptcy petil	tatement Abou tion.	ıt an E	viction Judgment A	Against You (Form 101A) and file it with		

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Debtor 1	Heather L.		Smith	Marie Programme and an analysis and a second	Cas	se number (if known)	
	Widdle No.	iiio	Last Name					
Part 3:	Report About Any	Busines	ses You Own as a \$	Sole Proprie	tor			
	you a sole proprietor	☑ No.	Go to Part 4.					
	ny full- or part-time iness?	☐ Yes	s. Name and location of	business				
A sol	le proprietorship is a							
indívi	ness you operate as an idual, and is not a		Name of business, if any				·····	
	rate legal entity such as poration, partnership, or							
LLC.	•		Number Street		·····			the first and th
sole	u have more than one proprietorship, use a			T1 7.1.	····			
sepai	rate sheet and attach it spetition.							
	o pouto		City	**************************************		State	ZIP Code	
			Check the appropriate	hay ta denarit	o construction			
			☐ Health Care Busine					
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
Commodity Broker (as defined in 11 U.S.C. § 101(6))								
			☐ None of the above	((0/)		
Chap Bank are y debto For a c busine	ou filing under oter 11 of the cruptcy Code and ou a small business or? definition of small ass debtor, see S.C. § 101(51D).	most reany of the	re filing under Chapter 1 appropriate deadlines. It cent balance sheet, state nese documents do not e I am not filing under Chapte the Bankruptcy Code. I am filing under Chapte Bankruptcy Code.	ement of opera exist, follow th apter 11.	nat you are a s ations, cash-flo e procedure in NOT a small b	small business w statement, at 11 U.S.C. § 11 usiness debtor	debtor, you nd federal in 16(1)(B). according	must attach your necome tax return or if to the definition in
Part 4:	Report if You Own o	r Have		erty or Any	Property Ti	ıat Needs In	ımediate	Attention
	ou own or have any erty that poses or is	Ø No						
allege	d to pose a threat	\square Yes.	What is the hazard?					
	ninent and fiable hazard to							
public	health or safety?							
	you own any rty that needs							
imme	diate attention?		If immediate attention i	s needed, why	is it needed?			
perisha that mu	ample, do you own able goods, or livestock ast be fed, or a building eds urgent repairs?						***************************************	
			Where is the property?					
				Number	Street			

				City			State	ZIP Code

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Debto	r 1

Heather		Smith
First Name	Middle Name	Last Name

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Heather L.	Smith The Last Name	Case number (if k	(nown)			
Part 6:	Answer These Que	stions for Reporting Purp	oses				
	t kind of debts do have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
		☑ No. Go to line 16b.☑ Yes. Go to line 17.					
		money for a business or	arily business debts? Business debts investment or through the operation of the	are debts that you incurred to obtain a business or investment.			
		No. Go to line 16c. Yes. Go to line 17.					
		16c. State the type of debts y	rou owe that are not consumer debts or bu	isiness debts.			
	ou filing under ter 7?	☐ No. I am not filing under	Chapter 7. Go to line 18.				
any e	ou estimate that after xempt property is ded and	aumnistrative expen	pter 7. Do you estimate that after any exe ses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?			
admir are pa availa	nistrative expenses aid that funds will be able for distribution secured creditors?	₩ No □ Yes					
	many creditors do stimate that you	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000			
9. How r estima be wo	much do you ate your assets to orth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
	nuch do you ate your liabilities >	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7:	Sign Below		The second of th	was wore train \$50 pillion			
For you		I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and			
		If I have chosen to file under C of title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, i I understand the relief available under ea	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed			
		If no attorney represents me arthis document, I have obtained	nd I did not pay or agree to pay someone of and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).			
			vith the chapter of title 11, United States C				
		I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	atement, concealing property, or obtaining sult in fines up to \$250,000, or imprisonme and 3571.	money or property by fraud in connection nt for up to 20 years, or both.			
		Signature of Debtor 1	Signature	of Debtor 2			
		Executed on 12/26/6	90/7 YYYY Executed				

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Debtor 1	Heather First Name	Middle Name	Smith Last Name		Case number (if known)			
bankrup attorney	if you are fili	n	should understand the themselves successf	nat many people find it o	ent yourself in bankruptcy court, but you extremely difficult to represent cy has long-term financial and legal re a qualified attorney.			
If you are represented by an attorney, you do not need to file this page.		ot	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audifirm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
			court. Even if you plan to in your schedules. If you property or properly clain also deny you a discharg case, such as destroying cases are randomly audit	p pay a particular debt outs do not list a debt, the debt n it as exempt, you may no ge of all your debts if you d or hiding property, falsifyinted to determine if debtors	edules that you are required to file with the side of your bankruptcy, you must list that debt to may not be discharged. If you do not list to be able to keep the property. The judge can o something dishonest in your bankruptcy ng records, or lying. Individual bankruptcy have been accurate, truthful, and complete. be fined and imprisoned.			
			If you decide to file without hired an attorney. The co successful, you must be to Bankruptcy Procedure, at	ut an attorney, the court ex ourt will not treat you differe familiar with the United Sta	expects you to follow the rules as if you had ently because you are filing for yourself. To be ates Bankruptcy Code, the Federal Rules of our tin which your case is filed. You must also			
			Are you aware that filing to	for bankruptcy is a serious	action with long-term financial and legal			
			☐ No ☑ Yes					
			inaccurate or incomplete,	uptcy fraud is a serious cri you could be fined or impi	me and that if your bankruptcy forms are risoned?			
			☐ No ☑ Yes					
			Did you pay or agree to page. No Yes. Name of Person_T		attorney to help you fill out your bankruptcy forms?			
			Attach Bankruptcy	Petition Preparer's Notice, i	Declaration, and Signature (Official Form 119).			
			have read and understood	d this notice, and I am awa	e risks involved in filing without an attorney. I re that filing a bankruptcy case without an if I do not properly handle the case.			
		*	:361.		*			
			Date Debtor Debt	1 <u>20</u> 17	Signature of Debtor 2 Date			
			Contact phone	1 1	MM / DD / YYYY Contact phone			
			Call phone (317) 69	1-0191				

Email address treather. lasher Egmail. com

Email address

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Debtor 1	Heather	L.	Smith	
	First Name	Middle Name	Last Neme	
Debtor 2				
Spouse, if filing)) First Name	Middle Name	Last Name	
Jnited States	Bankruptcy Court for	the: Northern District of	Illinois	

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

your original forms, you must fill out a new Summary and check the box at the top of this page.	amondou donounes after you me
Part 1: Summarize Your Assets	
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	s <u>1,500.00</u>
Part 2: Summarize Your Liabilities	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00 + \$ 53,949.00
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	s1,111.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ <u>1,145.00</u>

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De	ebtor 1	Heather First Name	Middle Name	L Last Name	Smith	Case number (d known)	
а	art 4:				strative and Stat	istical Records	
6.	Are you	u filing for b	ankruptcy un	der Chapters 7, 1	1, or 13?		
	☐ No. ☑ Yes		othing to report	on this part of the	form. Check this box	x and submit this form to the court with your othe	er schedules.
7.	What ki	nd of debt o	do you have?				
	2 You fam	ir debts are ily, or house	primarily con hold purpose."	sumer debts. Con 11 U.S.C. § 101(8)	<i>sumer debts</i> are tho). Fill out lines 8-9g f	ose "incurred by an individual primarily for a pers for statistical purposes, 28 U.S.C. § 159.	onal,
				consumer debts. other schedules.	You have nothing to	report on this part of the form. Check this box a	and submit
8.	From the Form 12	ne Statemer 22A-1 Line 1	nt of Your Cur 1; OR, Form 1	rent Monthly Inco 22B Line 11; OR , F	me : Copy your total Form 122C-1 Line 14	current monthly income from Official	s1,467.00
9.	Copy th	e following	special categ	ories of claims fro	om Part 4, line 6 of	Schedule E/F:	

Total claim

19,656.00

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	s19,656.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00

9g. Total. Add lines 9a through 9f.

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				!		
	on to identify your c	ase and this	Sfiling:			
Debtor 1 Heath		le Name	Smith Last Name			
Debtor 2			Last Name			
(Spouse, if filing) First Name		ile Name	Last Name			
United States Bankrupt	cy Court for the: Northe	m District of	Illinois			
Case number			***************************************			<u> </u>
						Check if this is ar amended filing
Official Forr	n 106A/R					uu.uuu mmg
Schedul	e A/B: Pro	opert	y			12/15
write your name an	plying correct information of the case number (if kn	nation. If mo lown). Answ	te and accurate as possible. If ore space is needed, attach a s er every question. Land, or Other Real Estate	eparate sheet to th	is form. On the top of	oth are equally any additional pages,
			t in any residence, building, la			
No. Go to Part Yes. Where is	2.		What is the property? Check a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile hom	all that apply.	Do not deduct secured of the amount of any secure Creditors Who Have Cla	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
*****			Land	ic .	s 0.00	portion you own?
			Investment property		<u> </u>	Ψ
City	State	ZIP Code	☐ Timeshare ☐ Other		Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
			Who has an interest in the pr	operty? Check one.		
County		71177	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an		Check if this is co (see instructions)	ommunity property
			Other information you wish to property identification number	o add about this it	∍m, such as local	
1.2	more than one, list he		What is the property? Check all Single-family home Duplex or multi-unit building	that apply.	Do not deduct secured of the amount of any secure Creditors Who Have Clair	d claims on Schedule D
Outer audies:	, a avaliado, di dillet qe.	·	Condominium or cooperative Manufactured or mobile home		Current value of the entire property?	Current value of the portion you own?
			Land		\$0.00	\$0.00
City	State	7IP Code	☐ Investment property ☐ Timeshare		Describe the nature of	of your ownership

City

County

State

ZIP Code

Other_

Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Who has an interest in the property? Check one.

Other information you wish to add about this item, such as local

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Check if this is community property

(see instructions)

Debtor		D94 DOC 1 F L. Last Name Last Name	Filed 12/27/17 Entered 12/27/17 Document Page 11 of 55 Case number (5:48 Desc	c Main	**************************************
1,	3. Street address, if availat	ole, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the a Cred Curr entii	ot deduct secured of the interest who Have Clarent value of the re property? 0.00 cribe the nature	red claims of aims Secure Curren portion \$	n Schedule D: d by Property. t value of the you own? 0.00
			Other Oheck one.	inter the e	est (such as fee entireties, or a li	simple, t	enancy by
	County		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Q c	Check if this is c see instructions)	ommunity	property
n # 11			Other information you wish to add about this its property identification number: Of your entries from Part 1, including any entries		**************************************		***************************************
you	have attached for Part	Write that number h	nere	1	.	Φ	0.00
Part 2	Describe Your	Vehicles					
Oo you you owr	own, lease, or have leg n that someone else drive s, vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	et in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts , motorcycles	not? Inc	clude any vehicle expired Leases.	·S	
Do you you owr 3. Cars	own, lease, or have leg n that someone else drive s, vans, trucks, tractors No Yes Make: Model:	pal or equitable intereses. If you lease a vehicle, sport utility vehicles, Dodge Caravan	who has an interest in the property? Check one.	Do not	clude any vehicle expired Leases. It deduct secured clause or such any secure or such a claim or such any secure or such a claim or such a cla	aims or exe d claims on	Schedule D:
Do you you owr 3. Cars 1 1	own, lease, or have legal that someone else drivens, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage:	gal or equitable intereses. If you lease a vehicle, sport utility vehicles,	e, also report it on Schedule G: Executory Contracts motorcycles Who has an interest in the property? Check one.	Do not the am Credito	expired Leases. It deduct secured clancing to the secure of the secure	aims or exe d claims on ms Secured Current	Schedule D:
Do you you owr 3. Cars 1 1	own, lease, or have leganthat someone else drivens, vans, trucks, tractors No Yes Make: Model: Year:	pal or equitable intereses. If you lease a vehicle, sport utility vehicles, Dodge Caravan 2004	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not the am Credito	expired Leases. It deduct secured clausers Who Have Claim In the value of the	aims or exe d claims on ms Secured Current	Schedule D: by Property. value of the
Do you own 3. Cars 2 1	own, lease, or have legal that someone else drivens, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage:	pal or equitable interestes. If you lease a vehicle, sport utility vehicles, Dodge Caravan 2004 196,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not the am Credito Curre entire	expired Leases. It deduct secured clause on the control of any secure ors Who Have Clair Internet value of the property?	aims or exe d claims on ms Secured Current portion	Schedule D: by Property. value of the you own?
Do you own 3. Cars 2 1	own, lease, or have legal that someone else drivens, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage: Other information:	pal or equitable interestes. If you lease a vehicle, sport utility vehicles, Dodge Caravan 2004 196,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not the am	expired Leases. It deduct secured clause on the control of any secure ors Who Have Clair Internet value of the property?	aims or exed delaims on exemple of the contract portion	Schedule D: by Property. value of the you own? 0.00
you own 3. Cars 1 1 21 3.1.	own, lease, or have legal that someone else drives, vans, trucks, tractors No Yes Make: Model: Year: Approximate mileage: Other information:	pal or equitable interestes. If you lease a vehicle, sport utility vehicles, Dodge Caravan 2004 196,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not the am Creditor Do not the am Creditor Curre entire	t deduct secured clands to the deduct secured clands to the dependent value of the property? 21,486.00	aims or exerd claims on exerd portion \$	Schedule D: by Property. value of the you own? 0.00

Case number (if known) Who has an interest in the property? Check one. Make: 3.3 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories MO No Q Yes Who has an interest in the property? Check one. Make: 41 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see 0.00 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one Make: Do not deduct secured claims or exemptions, Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Other information: portion you own? At least one of the debtors and another 0.00 0.00 Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

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Debtor 1

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Heather First Name

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Part 3:

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current va portion yo Do not dedu- or exemption	u own? ct secured claims
6.	Household goods and furnishings	or exemplior	1 5 .
	Examples: Major appliances, furniture, linens, china, kitchenware		
	Q No		
	Yes. Describe Household Furniture	•	800.00
		\$	000.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	O No	**	
	Yes. Describe TV and Cell Phone	\$	200.00
B	Collectibles of value	· . :	
Ο.	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;		
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe	•	0.00
		Ф	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	No Company of the Com		
	Yes. Describe	· • \$	0.00
	Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No		
	Yes. Describe		
	Too Doorson	\$	0.00
11.	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	□ No		
	Yes. Describe Clothing For Me	···.	500.00
		Υ	
12.	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	🛂 No		
	Yes. Describe	\$	0.00
13.	Non-farm animals		
	Examples: Dogs, cats, birds, horses		
	2 No		
	Yes. Describe		
		\$	0.00
	Any other personal and household items you did not already list, including any health aids you did not list		
	2 No		
1	■ Yes. Give specific	: •	0.00
	information	\$	0.00
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached		4 PAA A-
f	or Part 3. Write that number here	\$	1,500.00
		·	

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Debtor 1

Heather First Name

Case number (# known)

Part 4:

Describe Your Financial Assets

Do you own or have any	/ legal or equitable interest in	any of the following?		Current value portion you Do not deduct or exemptions.	own? secured claims
16. Cash Examples: Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file	your petition		
Ø No					
			ash:	\$	0.00
17. Deposits of money Examples: Checking, and other s	savings, or other financial accor similar institutions. If you have n	ints; certificates of deposit; shares in credit unions, bultiple accounts with the same institution, list each.	rokerage houses,		
No Ves		Institution name:			
	17.1. Checking account:	Fifth Third Bank		\$	0.00
	17.2. Checking account:			\$	0.00
	17.3. Savings account:			s	0.00
	17.4. Savings account:			\$	0.00
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:			\$	0.00
	17.7. Other financial account:			\$	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:			\$	0.00
Examples: Bond funds,	or publicly traded stocks investment accounts with broken	erage firms, money market accounts			
Ø No D Yes	Institution or issuer name:				
130	modulation issued righte.			_	0.00
	WH-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-W-			\$e	0.00
				\$	0.00
				* manus de mande de la companya de l	
19. Non-publicly traded s an LLC, partnership,		ated and unincorporated businesses, including	an interest in		
2 No	Name of entity:	%	of ownership:		
Yes. Give specific information about		0'		\$	0.00
them	***************************************	0		\$	0.00
		0,	<u>% </u> %	\$	0.00

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	Other:	\$ 0.00
23. Annuities (A contract fo	r a periodic payment of money to you, either for life or for a number of years)	
2 No		
Q Yes	Issuer name and description:	
		\$ 0.00
		\$ 0.00
		\$ 0.00

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Yes. Give specific information.....

0.00

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Doc 1

Debtor 1 Case number (if known) First Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Mo No Yes. Describe...... 0.00 41. Inventory A No Yes. Describe..... 0.00 42 Interests in partnerships or joint ventures M No ☐ Yes. Describe..... Name of entity: % of ownership: 0.00 0.00 % 0.00 43. Customer lists, mailing lists, or other compilations ☑ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 0.00 44. Any business-related property you did not already list ☑ No Yes. Give specific 0.00 information 0.00 0.00 0.00 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish M No **Q** Yes..... 0.00

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Fill in this	informatio	on to identify yo	ur case:									
Debtor 1	Heath		L. Middle Name	9	Smith Last Name							
Debtor 2 (Spouse, if filing	*****					***************************************						
' '		by Court for the: No	Middle Name rthern Distric	rt of Illinois	Last Name							
Case number	•	y countrol use. 140	ioiem Diogra	OC 01 11111013							□ Cha	ck if this is ar
(if known)												nded filing
O. (hov	4000										
Official		·····		s. <i>a</i> n an Awa m	Vara							
		C: The		Marie and the Control of the Control			ogumás a delición de la					12/15
Using the pro space is need	perty you led, fill out	curate as possible listed on <i>Schedu</i> t and attach to thi imber (if known).	le A/B: Prop	erty (Officia	l Form 106	A/B) as your so	urce, lis	t the propert	y that y	ou claim as	exempt. If	more
of any applic retirement fu limits the exe	ar amoun able stati inds—ma emption t	erty you claim a t as exempt. Alt utory limit. Som y be unlimited ii o a particular do e applicable sta	ernatively, j e exemption n dollar am- ollar amoun	you may clans—such a count. Howe the count is and the view of the	aim the ful s those for ver, if you	l fair market va r health aids, r claim an exen	alue of r rights to nption o	the property o receive cer of 100% of fa	/ being rtain b air mar	exempted enefits, and ket value u	up to the a i tax-exem inder a law	amount pt that
Part 1:	dentify	the Property \	ou Claim	as Exem _i)t			~			PARAGONIA CONTRACTOR DE LA CONTRACTOR DE L	
☐ You :	are claimii are claimii	nptions are you ng state and fede ng federal exemp you list on Sche	ral nonbank tions. 11 U.	ruptcy exen S.C. § 522(nptions. 11 b)(2)	U.S.C. § 522(b)(3)					
		of the property a t lists this proper		Current va		Amount of th	ne exem	ption you cla	aim	Specific la	ws that alic	ow exemption
				Copy the va Schedule A		Check only or	ne box fo	or each exemp	ption.			
Brief descripti	OH.	lousehold		\$ <u>800.00</u>	1	21 \$ 800.0		- -		735 ilcs 6	5/12-1001	1(b)
Line fron Schedule		***************************************						ket value, up atutory limit	10	·····		***************************************
Brief description	on: E	Electronics		\$ <u>200.00</u>		Ø \$ 200.0		<u>.</u>		735 ilcs 5	5/12-1001	1(b)
Line from Scheduk	,	•				100% of any appli		ket value, up atutory limit	to		The book to the same of the sa	
Brief descripti	on: C	Clothing		\$ <u>500.00</u>		2 1 \$ 500.0		<u>.</u>		735 ilcs 5	5/12-1001	1(a)
Line from Schedule		1				any appli		ket value, up atutory limit	to .		·····	
(Subject to Subject to	to adjustm	a homestead ex nent on 4/01/16 a cquire the propert	nd every 3 y	ears after th	nat for case	s filed on or aft		·				

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Debtor 1

Heather

Smith

Case number (# known)

Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description:	Automobile	\$0.00		735 ilcs 5/12-1001(c)	
Line from Schedule A/B:	3.1		100% of fair market value, up to any applicable statutory limit		
Brief description:	Checking Account	\$0.00		735 ilcs 5/12-1001(b)	
Line from Schedule A/B:	17.1		100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	u \$		
Line from Schedule A/B:	Name and the second section.		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	***	\$	u \$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	O s		
Line from Schedule A/B:	What be former as a summary.		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	- \$		
Line from Schedule A/B:	with a may have the selections.		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$			
Line from Schedule A/B:	***************************************		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	Q \$		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit		
Brief description:		\$			
Line from Schedule A/B:	MARKATAN A APPROXIMATION OF THE PROXIMATION OF THE		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	***************************************	\$			
Line from Schedule A/B:	Manuscript objects then		100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	Q \$		
Line from Schedule A/B:	1900 T-004-04-04-04-04-04-04-04-04-04-04-04-04		100% of fair market value, up to any applicable statutory limit		
Brief description:		\$	□ \$		
Line from Schedule A/B:	**************************************		☐ 100% of fair market value, up to any applicable statutory limit		

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Fill in this information to identify your cas				
Debtor 1 Heather L. First Name Middle 1	Smith Name Last Name			
Debtor 2				
(Spouse, if filing) First Name Middle N				
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (If known)			□ Che	eck if this is an
				ended filing
Official Form 106D				
	s Who Have Claims Secur	ed by Pro	3e2pév/	12/15
	If two married people are filing together, both are ed			
information. If more space is needed, copy additional pages, write your name and cas	/ the Additional Page, fill it out, number the entries	and attach it to this	or supplying col form. On the to	rect p of any
additional pages, write your name and cas	e number (it known).			
1. Do any creditors have claims secured b				
No. Check this box and submit this form Yes. Fill in all of the information below.	n to the court with your other schedules. You have nothi	ng else to report on t	his form.	
ear res. Fill in all of the information below.				
Part III List All Secured Claims				
2 List all account distance 16 and 16 to		Column A	Column B	Column C
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collate	ral Unsecured
As much as possible, list the claims in alph	abetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports the	is portion if any
2.1 CAPITAL ONE AUTO FINANCE	Describe the property that secures the claim:	\$24,186.00	\$ 24,186.0	0.00 o
Creditor's Name P.O. BOX 259407	2004 Dodge Caravan		· · · · · · · · · · · · · · · · · · ·	7
Number Street	2004 Dodge Caravari			
	As of the date you file, the claim is: Check all that apply.			
PLANO TX 75025	☐ Contingent ☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car toan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt Date debt was incurred 10/10/0201				·
2.2	Last 4 digits of account number 5 6 7 0			
Creditor's Name	Describe the property that secures the claim:	\$0.00	\$	0.00
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZiP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Under the trom a lawsuit Under the trom a lawsuit Under the trom a lawsuit			
Check if this claim relates to a community debt	· / / / / / / / / / / / / / / / / / / /			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in Co	olumn A on this page. Write that number here:	24,186,00		A company of the second second second

Case 17-38094 Doc 1 Filed 12/27/17 Entered 12/27/17 14:25:48 Desc Main Page 23 of 55 Document Fill in this information to identify your case: Heather Smith Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). CATTON List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount Last 4 digits of account number 0.00 \$ 0.00 \$ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated Other, Specify ☐ No ☐ Yes 2.2 0.00 s 0.00 s Last 4 digits of account number _ 0.00 Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No Yes

page 1 of

Debtor 1	Case 17-38094 Heather First Name Middle Name	Doc 1 L.	Filed 12/27/17 Document	Z Entered 12/27/17 Page 24 of 55 Case number @	14:25:48	Desc Main
Part 2:	List All of Your NONF	RIORITY U	nsecured Claims			
A. List all nonpri	s I of your nonpriority unse ority unsecured claim, list th	rt in this part. S cured claims ne creditor sepa ne creditor hold	Submit this form to the in the alphabetical or arately for each claim	court with your other schedules. rder of the creditor who holds of the creditor who holds of the creditors in Part 3.If yether creditors in Part 3.If yether creditors in Part 3.	nat tune of claim it	ic Do not list alaima almant.
4.1	\/ \mathcal{B}					Total claim
Nonpri	Y FINANCIAL onty Creditor's Name . BOX 380901			Last 4 digits of account number When was the debt incurred?	r <u>1 2 1 7</u> 10/04/2007	7 \$ 7,672.00
Numbe		MN State	55438 ZIP Code	As of the date you file, the claim	n is: Check all that a	apply.
Ø 0.0 © 0.0	incurred the debt? Check on abtor 1 only abtor 2 only abtor 1 and Debtor 2 only least one of the debtors and an			☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsect	ured claim:	
		mmunity debt		Obligations arising out of a sepa that you did not report as priority Debts to pension or profit-sharing Other. Specify Collections	claims g plans, and other si	
Nonprio P.O.	PITAL ONE BANK USA ority Creditor's Name BOX 30281	\ NA		Last 4 digits of account number When was the debt incurred?	<u>8 3 9 9</u> 12/14/2005	<u>\$</u> 2,100.00
City Who i Ø De D De	T LAKE CITY ncurred the debt? Check one btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors and and		ZIP Code	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecu		opły.
Осн	eck if this claim is for a con		!	Student loans Obligations arising out of a separ that you did not report as priority Debts to pension or profit-sharing other, Specify Coll Accts N	claims plans, and other sir	milar debts

CHASE/BANK ONE CARD SERV Last 4 digits of account number _3 _4 _9 _9 Nonpriority Creditor's Name 07/15/2005 When was the debt incurred? PO BOX 15298 Number Street WILMINGTON DE 19850 As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans $oldsymbol{\square}$ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts A No

623.00

Yes

☐ Yes

✓ Other Specify <u>Collections Account</u>

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	er listing any entries on this page, n	umber the	m beginning with 4	.4, followed by 4.5, and so forth.	Total claim
4.4	COMENITY BANK/NWYRK&	СО		Last 4 digits of account number 5 1 7 3	s 754.00
	Nonpriority Creditor's Name PO BOX 182789			When was the debt incurred? 09/01/2002	T
	Number Street COLUMBUS	ОН	43218	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes	State	ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Collections Account 	
4.5	CREDIT ONE BANK			Last 4 digits of account number 0 7 0 5	\$ <u>811.00</u>
	Nonpriority Creditor's Name P.O. BOX 98872			When was the debt incurred? 02/18/2016	
	Number Street LAS VEGAS	NV	89193	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communication.	aitv deht		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
4.6			* *		s 475.00
	FIRST PREMIER BANK Nonpriority Creditor's Name	~~~~~~		Last 4 digits of account number 8 2 1 7	V
	3820 N LOUISE AVE			When was the debt incurred? 04/17/2017	
	SIOUX FALLS	SD	57107	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commun is the claim subject to offset? ☑ No ☐ Yes	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	

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Your NONPRIORITY Unsecured Claims — Continuation Page

7311	er listing any entries on this page, n	univer (18	am nediuulud Miti	и 4.4, тоноwed by 4.5, and so forth.	Total claim
4.7	GINNY'S INC			Last 4 digits of account number 1 8 1 7	s 322.00
	Nonpriority Creditor's Name 1515 S 21ST ST			When was the debt incurred? 11/12/2010	\$
	Number Street CLINTON	IA	52732	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commuls the claim subject to offset? No Yes		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
4.8	PIONEER MCB		•••	Last 4 digits of account number 5 5 5 6	s 3,900.00
	Nonpriority Creditor's Name 3240 E TROPICANA			When was the debt incurred? 10/11/2013	7
	Number Street LAS VEGAS	NV	89121	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes			 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Collections Account 	
4.9		•			
<u> </u>	USAA FED SVG BK Nonpriority Creditor's Name		wa	Last 4 digits of account number 7 1 4 2	s 10,141.00
	PO BOX 47504			When was the debt incurred? 11/24/2015	
	Number Street SAN ANTONIO	TX	78265	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	

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Your NONPRIORITY Unsecured Claims - Continuation Page

Afi	er listing any entries on this page, n	umber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
5.0	WORLD FINANCE COMPAN	ΙΥ		Last 4 digits of account number 0 1 3 7	s 1,200.00
	Nonpriority Creditor's Name P.O.BOX 6429			When was the debt incurred? 10/01/2012	7
	Number Street GREENVILLE, SC 2960	sc	29606	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a communication.			 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? No Yes	inity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
5.1	I C SYSTEMS COLLECTION Nonpriority Creditor's Name	S		Last 4 digits of account number 6 6 3 0	\$209.00
	PO BOX 64378			When was the debt incurred? 08/08/2016	
	Number Street SAINT PAUL	MN	55164	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a commuls the claim subject to offset?			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 	
5.2	☑ Yes				s 88.00
	PRO COM SERVICES OF ILL Nonpriority Creditor's Name	INOIS, II	NC	Last 4 digits of account number 8 6 6 6	P
	3301 CONSTITUTION DRIVE			When was the debt incurred? 02/01/2012	
	SPRINGFIELD City	State	62711 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one. Debtor 1 only	Suit	Zii Ovde	Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community the claim subject to offset? ☑ No ☐ Yes	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 	

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First Name Middle Name Leathers Page 28 of 55

Case number (if known)

Debtor 1

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Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, n	number the	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
5.3	STELLAR RECOVERY			Last 4 digits of account number 8 5 4 5	s 157.00
	Nonpriority Creditor's Name P O BOX 48370			When was the debt incurred? 09/13/2012	Ψ
	Number Street JACKSONVILLE	FLF	32247	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and anothe	er		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a comme	unity debt		you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	₩ No Yes			Other Specify Collections Account	
1					
5.4	ELEVATE			Last 4 digits of account number 6 6 6 0	<u>\$_1,525.00</u>
	Nonpriority Creditor's Name 4150 INTERNATIONAL PLAZ Number Street	ZA SUITE	E 300	When was the debt incurred? 05/16/2016	
	FORT WORTH	TX	76109	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	inity debt		you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	No			Other Specify Collections Account	
	Yes				
			* .		
5.5					s 18,560.0g
	US DEPT. OF EDUCATION/G Nonpriority Creditor's Name	<u> </u>		Last 4 digits of account number 5 6 7 9	**************************************
				When was the debt incurred? 08/30/2016	
	P.O.BOX 7859 Number Street				
	MADISON	WI	53704	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	□ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims	
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts	
	2 No			Other: Specify	
	Yes				

Your NONPRIORITY Unsecured Claims — Continuation Page

Aft	er listing any entries on this page, n	umber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
5.6	RISE PAYDAY			Last 4 digits of account number 8 4 3 7	_{\$} 1,500.00
	Nonpriority Creditor's Name P.O. BOX 101808			When was the debt incurred? 01/01/2013	Ψ-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
	Number Street FORTH WORTH	TX	76185	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe	r		Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for a commu			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? No Yes	anity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
5.7				(- 4 4 3 - 1 - 1 - 1 - 1 - 2 4 3 - 7	4 700 00
	BIG PICTURE PAYDAY LOA Nonpriority Creditor's Name	N		Last 4 digits of account number 8 4 3 7	\$ <u>1,700.00</u>
	E23970 POW WOW TRAIL			When was the debt incurred? 02/02/2015	
	WATERSMEET	МІ	49969	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a commu Is the claim subject to offset? No Yes			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 	
5.8					s 1,096.00
	Aes/PHEAA Nonpriority Creditor's Name			Last 4 digits of account number 8 4 3 7	5
	P.O. BOX 2461			When was the debt incurred? 07/01/2008	
	Number Street HARRISBURG	PA	17105	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
				Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for a community the claim subject to offset? No Yes	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	

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Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, r	number the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
5.9	Equifax Bankruptcy Departm	ent		Last 4 digits of account number 8 4 3 7	\$ 0.00
	Nonpriority Creditor's Name P.O. Box 740241			When was the debt incurred? 01/01/2012	***************************************
	Number Street Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm Is the claim subject to offset?	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
6.0	Experian Bankruptcy Deparm Nonpriority Creditor's Name P.O. Box 2002	nent		Last 4 digits of account number 8 4 3 7 When was the debt incurred? 01/01/2012	s0.00
	Number Street Allen	TX	75013	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commuls the claim subject to offset? No Yes		ZIP Code	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 	
6.1	TransUnion Bankruptcy Depa	rtmont		Last 4 digits of account number 8 4 3 7	\$0.00
	Nonpriority Creditor's Name P.O. Box 1000			When was the debt incurred? 01/01/2012	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	Chester City Who incurred the debt? Check one. Debtor 1 only	PA State	19022 ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	r		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commuls the claim subject to offset? ✓ No ☐ Yes	inity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	

Heather

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, n	umber thei	n beginning witl	h 4.4, followed by 4.5, and so forth.	Total claim
6.2	ARMED FORCES LOAN OF	NEVADA	L	Last 4 digits of account number 8 4 3 7	s 1,116.0
	Nonpriority Creditor's Name 3824 S. JONES BLVD., STE	G		When was the debt incurred? 12/02/2014	
	Number Street LAS VEGAS		00400	As of the date you file, the claim is: Check all that apply.	
	City	NV State	89103 ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anothe	و		Student loans	
				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community the claim subject to offset?	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
	No			Other. Specify Coll Acct Multiple Accts	
	Yes				
6.3	CHEX SYSTEM Nonpriority Creditor's Name	AvWell's Perference and a second		Last 4 digits of account number 8 4 3 7	s0.00
	7805 HUDSON ROAD			When was the debt incurred? 01/01/2012	
	Number Street WOODBERRY	MN	55125	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated Disputed	
	Debtor 1 only				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	r		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	inity debt		you did not report as priority claims	
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
	₩ No			0.000	
	Yes				
6.4					s 0.00
	CERTEGY Nonpriority Creditor's Name			Last 4 digits of account number 8 4 3 7	Ψ
	11601 ROOSEVELT BLVD. N	<u> </u>		When was the debt incurred? 01/01/2012	
	ST. PETERSBURG	FL	33716	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.			Disputed	
	Debtor 1 only Debtor 2 only			T. (NONETICE)	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify Collections Account	
	☑ No ☐ Yes				

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Debtor 1

Heather

Part 3s

Document Page 32 of 55

List Others to Be Notified About a Debt That You Already Listed

2, then list the collection agency here. Similarly	ified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For ect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 4, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the tional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
BANFIELD PET HOSPITAL Name	On which entry in Part 1 or Part 2 did you list the original creditor?
4824 LINCOLN HWY.	Line 5.1 of (Check one): Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured C

4824 LINCOLN HWY. Number Street			Line 5.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
4			Part 2: Creditors with Nonpriority Unsecured Claims
MATTESON	IL	60443	Last 4 digits of account number 6 6 3 0
City	State	ZIP Code	
ILLINI BANK Name			On which entry in Part 1 or Part 2 did you list the original creditor?
301 NORTH MAIN STE	REET		Line 5.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
O2 14 TX 14 15			Claims
CHATHAM City	IL State	62629 ZIP Code	Last 4 digits of account number 8 6 6 6
COMCAST CABLE	and the second		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. BOX 3002			Line 5.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		, , , , , , , , , , , , , , , , , , , ,	Part 2: Creditors with Nonpriority Unsecured Claims
SOUTHEASTERN		40200	
City	PA State	19398 ZIP Code	Last 4 digits of account number 8 5 4 5
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
City	State	ZIP Code	Lucia - digita di account mumba
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Namo			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
		······································	Claims
City	0		Last 4 digits of account number
City	State	ZIP Code	$(x,y) = (x,y) \cdot (x,y) \cdot (y,y) \cdot (y,y$
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name		·	
Number Street		**************************************	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
****			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number

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Case number (if known)

Debtor 1

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6а	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	Taxes and certain other debts you owe the government		\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	s	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e.	. Total. Add lines 6a through 6d.	6e.		0.00
				\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	19,656.00
Total claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		19,656.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority	• • • • • • • • • • • • • • • • • • • •	\$	· · · · · · · · · · · · · · · · · · ·
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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					2 oodiii oik	. ago c : 5: 55	
FII	ll in this i	nformation to	identify you	r case:			
De	btor	Heather	L		Smith	of the property of a security of the security	
De	btor 2	First Name		viiddle Name	Last Name		
	ouse if filing	First Name	,	viddle Name	Last Name	-	
Un	ited States	Bankruptcy Cou	urt for the: North	nem District o	of Illinois		
	se number known)	***************************************					Check if this is an
			**************************************			NAME AND ADDRESS OF THE PARTY O	amended filing
~ .							
		orm 10					
Sc	ched	ule G: I	Execut	ory Co	ontracts ar	nd Unexpired Leases	12/15
addi	tional pa Do you t	t more space ges, write you nave any exec theck this box	e is needed, c ur name and c cutory contra- and file this fo	opy the addi case number cts or unexp orm with the c	tional page, fill it out, r (if known). ired leases? ourt with your other so	g together, both are equally responsible for number the entries, and attach it to this hedules. You have nothing else to report on are listed on Schedule A/B: Property (Official	page. On the top of any
	List sepa	rately each p rent, vehicle	erson or com	pany with w	hom you have the co	ontract or lease. Then state what each conform in the instruction booklet for more exam	tract or local in for the
	Person c	r company w	rith whom you	ı have the co	ontract or lease	State what the contract or least	se is for
2.1							
	Name					-	
	Number	Street	······································	······	······································		
		··········					
	City		State	ZIP Code			
2.2	Name -						
	Name						
	Number	Street	***************************************				
	City		State	ZIP Code			
2.3							
	Name					one and	
	Number	Street	·····				
	0.4					MATERIAL MAT	
2.4	City		State	ZIP Code			
	Name					MARKET TO THE PARTY OF THE PART	
,	63l						
	Number	Street					
í	City		State	ZIP Code		**************************************	
2.5			****				
1	Name						

Number

City

Street

ZIP Code

State

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Fil	ll in thi	s information to ide	ntify your case:					
D.0	ebtor 1	Heather	ı	Smith				
De	aptor i	First Name	Middle Name	Smith Last Name				
	ebtor 2 pouse, if fil	ling) First Name	Middle Name	Last Name	WW.			
Un	nited Stat	les Bankruptcy Court for	r the: Northern District of			-		
	ise numt							
	known)						☐ Chec	k if this is ar
								nded filing
Of	ficial	Form 106F						
Sc	che	dule H: Yo	_ our Codebto	rs				12/15
and	numbe numb Do you	or the entries in the er (if known). Answ I have any codebtor	boxes on the left. Atta	supplying correct in the Additional I	ntormation. Page to this	If more spa page. On th	ete and accurate as possible. If two mode is needed, copy the Additional Page top of any Additional Pages, write y	
	☐ Yes							
2.	Within Arizona	i the last 8 years, ha a. California Idabo I	i ve you lived in a com Louisiana, Nevada, New	munity property st	ate or territor	ry? (Commu	unity property states and temitories includ	le
		. Go to line 3.	.odisiana, Mevada, Mew	/ IMEXICO, Puelto Ri	co, rexas, vva	asnington, a	nd vvisconsin.)	
			ormer spouse, or legal o	equivalent live with	ou at the time	e?		
		No						
		Yes. In which comm	unity state or territory d	id you live?		Fill in the	name and current address of that perso	n.
		Name of your spouse, for	mer spouse, or legal equivalent					
		Number Street						
		City	State		ZIP Code			
	shown Schedu	in line 2 again as a ule D (Official Form	codebtor only if that a	oerson is a guaran Official Form 106E	tor or cosign	er. Make si	pouse is filing with you. List the persoure you have listed the creditor on cial Form 106G). Use Schedule D,	on
	Colum	n 1: Your codebtor				Co.	lumn 2: The creditor to whom you owe	the debt
[_{0,4}]						Ct	eck all schedules that apply:	
3.1	Name			***************************************			Schedule D, line	
	1401110						Schedule E/F, line	
	Numbe	er Street					Schedule G, line	
	City		State		ZiP Code	·····		
3.2								
	Name						Schedule D, line	
	Numbe	r Street			*****		Schedule E/F, line	
						u	Schedule G, line	
2 2	City		State	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	ZIP Code			
3.3	Name						Schedule D, line	
	Haille						Schedule E/F, line	
	Number	r Street			······································	· · · · · · · · · · · · · · · · · · ·	Schedule G, line	
	City		State		ZIP Code			

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	Fill in this ir	nformation to identify	Yyour Case:							
١,	Debtor 1	Heather	I 9	Smith						
		First Name	Middle Name	Last Name						
ł	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
₍	United States	Bankruptcy Court for the:	Northern District of Illinois							
	Case number									
	(If known)						·		f this is:	
L		· · · · · · · · · · · · · · · · · · ·							mended filing	
							_	incor	pplement showing postpetition cha ne as of the following date:	apter 13
<u>o</u>	fficial Fo	orm 106I	_						DD / YYYY	
S	ched	lule I: You	ir Income							12/15
If y	ou are sep parate shee	arated and your spoi	ou are married and not hi use is not filing with you, top of any additional pa	ing jointly, and y	OUT S	pous	e is livir	ng with	tor 2), both are equally responsible you, include information about you ouse. If more space is needed, atta- known). Answer every question.	
1.	Fill in your informatio	employment n.		Debtor 1					Debtor 2 or non-filing spouse	
	If you have	more than one job,		1806 1806-1806 1807 1806 1806 1806 1806 1806 1806 1806 1806	ажиландыр,	d-nerskemmen	Stanfolko phesistoja kiloisia	IE PRODUCE POR CONCORD	nder eine der gereichte der der der der der der der der der de	nasharasharakashara
	attach a se	parate page with about additional	Employment status	☑ Employed					☐ Employed	
	employers.	as at additional		☐ Not employ	/ed				Not employed	
		t-time, seasonal, or							. ,	
	self-employ		Occupation	Mail Process	sor					
		may include student ker, if it applies.								***************************************
			Employer's name	United Parce	el Se	rvice	e, Inc.			
			Employer's address	55 Glenlake	Parl	/\#/\$\/	, NE			
			. •	Number Street	- GII	· · · · ·			Number Street	
				White the second		*				
				- 	*****		·			
				Atlanta		GΑ		328		
				City	Sta	ite 2	ZIP Code		City State ZIP C	ode
			How long employed ther	re? 4 Mths					4 Mths	
G	art 2: G	iive Details About	Monthly Income							
	Estimate m	onthly income as of	the date you file this form	ı. If you have nothi	ing to	repor	rt for any	line, w	rite \$0 in the space. Include your non-	filina
	spouse unie If you or you	ss you are separated. Ir non-filing spouse ha		r combine the info					or that person on the lines	Ü
,		apado, do	w vopalate sheet to th	WINI.		F	or Debt	or 1	For Debtor 2 or	
2.	List month	ly gross wages, sala	ry, and commissions (bef	fore all navroll		ti=tantistaanga	POST-MANUFACTURES	Mariana englistica	non-filing spouse	
	deductions)). If not paid monthly, o	calculate what the monthly	wage would be.	2.	\$_	1,411	.00	\$	
3.	Estimate a	nd list monthly overt	ime pay.		3.	+\$_	56	.00	+ \$	
4.	Calculate g	gross income. Add lin	e 2 + líne 3.		4,	\$_	1,467	.00	\$	

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Debtor 1	Heather L. Smith First Name Middle Name Last Name		С	ase number (##	known)	
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Copy line	4 here	→ 4.	\$_	1,467.00		
5. List all pa	yroll deductions:					
5a. Tax,	Medicare, and Social Security deductions	5a	. \$	304.00	\$	
5b. Man o	datory contributions for retirement plans	5b	. \$	0.00		
5c. Volu	ntary contributions for retirement plans	5c.	. \$	0.00	\$	
5d. Requ	aired repayments of retirement fund loans	5d.	. \$	0.00		
5e. Insu i	rance	5e	\$	0.00	\$	
5f. Dom	estic support obligations	5f.	\$	0.00	\$	
5g. Unio	n dues	5g.	\$	52.00	. \$	
5h. Othe	r deductions. Specify: n/a	5h.		0.00		
	payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.		\$	356.00	+ \$ \$	
7. Calculate	total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,111.00	\$	
List all ot	her income regularly received:					
8a. Net in profe	ncome from rental property and from operating a business, ssion, or farm					
receir	h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total only net income.	8a.	\$	0.00	\$	
	est and dividends	8b.	æ	0.00	e	
8c. Famil	ly support payments that you, a non-filing spouse, or a dependently receive		Φ	0.00		
Includ settler	le alimony, spousal support, child support, maintenance, divorce ment, and property settlement.	8c.	\$	0.00	\$	
	ployment compensation	8d.	\$	0.00	\$	
	I Security	8e.	\$	0.00	\$	
Includ that yo Nutriti	government assistance that you regularly receive e cash assistance and the value (if known) of any non-cash assistance ureceive, such as food stamps (benefits under the Supplemental on Assistance Program) or housing subsidies. by: n/a	ice 8f.	\$	0.00	\$	
					*	
	on or retirement income	8g.	\$	0.00	\$	
8h. Other	monthly income. Specify: n/a	8h.	+\$	0.00	+\$	
	her income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	
Calculate r Add the ent	nonthly income. Add line 7 + line 9. tries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	1,111.00	+ \$	= s 1,111.00
. State all of Include con friends or re	ther regular contributions to the expenses that you list in Sched stributions from an unmarried partner, members of your household, you elatives.	<i>iule J</i> our d	epende	nts, your roor	mmates, and other	
Do not inclu Specify: n/s	ude any amounts already included in lines 2-10 or amounts that are r a	not av	ailable	to pay expen	ses listed in <i>Schedule J</i> .	- s 0.00
. Add the an Write that a	nount in the last column of line 10 to the amount in line 11. The mount on the Summary of Your Assets and Liabilities and Certain St	result fatistic	is the c	combined mor	nthly income.	\$ 1,111.00 Combined
3. Do you ex 21 No.	pect an increase or decrease within the year after you file this fo	orm?				monthly income
☐ Yes. E	xplain:			······································		

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Debtor 1 Heather First Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the Case number (if known) Official Form 106J Schedule J: Yo	L. Smith Middle Name Last Name Middle Name Last Name S: Northern District of Illinois		ded filing ment showing post as of the following	
Be as complete and accurate as pinformation. If more space is nee	possible. If two married people are fill ded, attach another sheet to this form	ing together, both are equally res n. On the top of any additional pa	ponsible for supply ges, write your nam	12/15 ring correct se and case number
(if known). Answer every question Part 1: Describe Your Ho	n.			
STATE OF THE PROPERTY OF THE P	usenoid	Management of the second secon	**************************************	
 Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a No. Yes. Debtor 2 must f 	separate household? ile Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do not list Debtor 1 and Debtor 2. Description:	No Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.				No Yes
Do your expenses include expenses of people other than yourself and your dependents?	No Q Yes			
Estimate your expenses as of your expenses as of a date after the bar applicable date. Include expenses paid for with no	ing Monthly Expenses r bankruptcy filing date unless you an nkruptcy is filed. If this is a suppleme n-cash government assistance if you d it on Schedule I: Your Income (Office	ental Schedule J, check the box at know the value of	nt in a Chapter 13 c the top of the form Your exper	and fill in the
	expenses for your residence. Include		Sont billion de la constante d	500.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or r			4b. \$	0.00
4c. Home maintenance, repair,	, , ,		4c. \$	0.00
4d. Homeowner's association of	r condominium dues		4d. \$	0.00

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Debtor 1 Heather L. Smith Case number (if known).

			Your ex	penses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	120.00
	6b. Water, sewer, garbage collection	6b.	¢	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
	6d. Other. Specify: n/a	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	100.00
8.	Childcare and children's education costs	8.	¢	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	φ ¢	100.00
11.	Medical and dental expenses	11.	φ	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.	17.	Ψ	0.00
	Do not include car payments.	12.	\$	175.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify: n/a	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify: n/a	17¢.	\$	0.00
	17d. Other. Specify: n/a	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	174.	* <u></u>	
	your pay on line 5, Schedule I, Your Income (Official Form 106i).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify: n/a	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	

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Debtor	1 Heather	L. Middle Name	Smith Last Name	Case number (#)	inown)	····	
21. O t	her. Specify: <u>n/a</u>			****	21.	+\$	0.00
22. Ca	lculate your mont	thly expenses.					
22	a. Add lines 4 throu	ugh 21.			22a.	\$	1,145.00
22	b. Copy line 22 (mo	onthly expenses for De	ebtor 2), if any, from Official Form	106J-2	22b.	\$	0.00
22	c. Add line 22a and	f 22b. The result is you	ur monthly expenses.		22c.	\$	1,145.00
23. Cale	culate your month	nly net income.					
23a.	Copy line 12 (yo	our combined monthly	income) from Schedule I.		23a.	\$	1,111.00
23b.	Copy your month	hly expenses from line	22c above.		23b.	- \$	1,145.00
23c.		onthly expenses from ir monthly net income.	your monthly income.		23c.	\$	-34.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

M No.

Q Yes.

Explain here:

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				9	
ill in this inf	ormation to identi	fy your case:			
ebtor 1	Heather	L.	Smith		
_	First Name	Middle Name	Last Name	And the state of t	
ebtor 2 couse, if filing)	First Name	Middle Name	Last Name		
nited States B	ankruptcy Court for the	e: Northern District of	f Illinois		
ase number fknown)			*************************************		
					Check if this is amended filing
Official	Form 106E)ec			
	· · · · · · · · · · · · · · · · · · ·		数数写数		
necis	iration /	about an	Individua	l Debtor's Schedules	12/15
f two morris	nd naania ara filin	a taaathay bath ay	ibl- f-		
two marri	ed people are filing	g togetner, both are	equally responsible to	or supplying correct information.	
	Sign Below				
Did you	pay or agree to pa	y someone who is N	NOT an attorney to hel	p you fill out bankruptcy forms?	NOTES TO COMMISSION OF THE PROPERTY OF THE PRO
☐ No					
☑ Yes.	Name of person Ta	nia Stoxstell		. Attach Bankruptcy Petition Preparer's Notice, Dec	laration, and
				Signature (Official Form 119).	
Under no	malhy of notions t	doctors that I have	read the accommon and	and and the filter desired to the state of t	
that they	are true and corre	ect.	ead the summary and	schedules filed with this declaration and	
	0				
× 3/.	1 /ca	1	×		
Signature	of Debtor	<u> </u>	Signature of D	Debtor 2	
1-	lactoria		-		
Date <u>/2</u>	18618017		Date	3 / YYYY	

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	Fill in	this in	formation t	o identify	your case:								
	Debtor	r 1	Heather First Name		L. Middle Name		Sm	i th ast Name	-				
	Debtor (Spouse		First Name		Middle Name			ast Name		***************************************			
	United	States i	Bankruptcy Co	ourt for the:	Northern Distr	rict of Illin	ois						
	Case r	number vn)										E	Check if this is an
L								· · · · · · · · · · · · · · · · · · ·				-	amended filing
			orm 10	······································							_		
BOOK	San benienner	*****************	- De arte anna de la company de l'institute de la company de	COCOCONOLISIAN ACCESSION DATES	de de distribuir de la companya de l	ON CONTRACTOR OF THE PARTY OF T	S-Company of the State of the S		ale was a party of the party of	uals Filing	A PERSONAL PROPERTY OF THE PERSONAL PROPERTY O		
İt	iforma	ition. I	ie and accu f more spac own). Answ	e is need	led, attach a s	married eparate s	peop sheet	to this for	g tog m. C	ether, both are equ In the top of any ad	ally respons ditional page	ible for supplyir es, write your na	g correct me and case
	Part	OF G	ive Detail:	s About	Your Marital	l Status	and	Where Y	ou l	ived Before		With the first of the second s	
	1. Wh	at is y	our current	marital st	atus?								
		Marrie Not m											
		ring the No	e last 3 year	rs, have y	ou lived anyw	here oth	er tha	ın where y	ou li	ve now?			
			ist all of the	places you	u lived in the la	ast 3 years	s. Do	not include	e whe	ere you live now.			
		Debi	or 1:				Dates ived t	Debtor 1 here	De	btor 2:			Dates Debtor 2 lived there
										Same as Debtor 1			Same as Debtor 1
		Num	ber Stree	·t		F	rom			Number Street	······································		From
						Т	o	~~~~		Trustinoi Odeot			То
			······································									And the second s	
		City			State ZIP Code	е				City	State	ZIP Code	
										Same as Debtor 1			Same as Debtor 1
		Num	ber Stree	t			rom	***************************************		Number Street			From
							o	***************************************				***************************************	То
		City		***************************************	State ZIP Code					City	State	ZIP Code	
	{ \A/i+	_	last R voer	e didye:				logal omet	-ماور	it in a community p			
	stat	tes and	territories in	s, ara you clude Ariz	ona, California	a, Idaho, L	ouisi:	ana, Nevad	la, N	ew Mexico, Puerto R	ico, Texas, W	ashington, and V	mmunity property visconsin.)
			ake sure yo	u fill out S	chedule H: You	ur Codebt	tors (C	Official For	n 10	5H).			
			•				,			•			
	Partl 2	H Ext	olain the S	ources	of Your Inco	me							
		AND THE RESERVE OF THE PERSON NAMED IN		***************************************	**************************************		***************************************		SAURES HAVE				

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Debtor 1			Smith	Case nu	imber (if known)	
	First Name Middle Name	Last i	Name			
Fil If y	d you have any income from e Il in the total amount of income you you are filing a joint case and you No I Yes. Fill in the details.	ou received	from all jobs and all bus	inesses, including part-ti	me activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current yethe date you filed for bankru		Wages, commissions, bonuses, tips Operating a business	\$5,074.00	Wages, commissions, bonuses, tips Operating a business	\$
	For last calendar year: (January 1 to December 31,2)	115 \	Wages, commissions, bonuses, tips	\$72,140.00	Wages, commissions, bonuses, tips	\$
		ΥY	₩ages, commissions,		Operating a business Wages, commissions,	
	(January 1 to December 31, 20		bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
Lis	mbling and lottery winnings. If yo t each source and the gross inco No					e under Debtor 1.
	Yes. Fill in the details.		Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current ye the date you filed for bankru					
	·					·
	For last calendar year:	-		\$		\$
	(January 1 to December 31, $\frac{20}{yy}$	<u>)15</u>) .		\$		
	For the calendar year before	that:		\$		\$
	(January 1 to December 31,20	<u>)16</u>) 77				\$

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Debtor 1	Heather First Name Midd	L. le Name Last Na	Smith	Case	number (if known)	
Part 3:	Liot Cartain Su	Mr. B& F	We do so such			
Palleon	List Certain Pa	yments You Mad	e Before You Filed	for Bankruptcy		
6. Are ei	ither Debtor 1's or E	Debtor 2's debts pri	marily consumer deb	its?		
□ N	incurred by an in	dividual primarily for	a personal, family, or	ebts. Consumer debts a household purpose." pay any creditor a total o	tre defined in 11 U.S.C. § 10	1(8) as
	No. Go to line		baria aproy, ala you p	ay any deditor a total o	r po,425 of mote:	
	total amo child sup	ount you paid that cre port and alimony. Al	editor. Do not include p so, do not include payı	payments for domestic s ments to an attorney for	or more payments and the upport obligations, such as this bankruptcy case. after the date of adjustment.	
ø v					aner the date of adjustment.	
VSmat 1 C			rimarily consumer de	obts. ay any creditor a total of	f \$600 or mara?	
	No. Go to line		outmapley; and you p	ay any ordenor a total of	thoop of more;	

	creditor.	Do not include pavm	ents for domestic sun:	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and see.	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			\$	\$	☐ Mortgage
	10 -11-11-11-11-11-11-11-11-11-11-11-11-11					Car
	Number Street	l .				Credit card
	· · · · · · · · · · · · · · · · · · ·					Loan repayment
	City	A				Suppliers or vendors Other
	Спу	State ZIF	² Code			Ca Other
				\$	\$	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
						Loan repayment
	Hard Control of the C					Suppliers or vendors
	City	State ZIF	Code			Other
				\$	\$	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City	State ZIP	Code			Other

City

ZIP Code

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Debtor 1	Heather First Name	Middle Name	<u>L.</u>	Last Name	Smith		Case number (if known)
7. With	nin 1 year befor	e you filed	for bai	nkruptcy, did	you make a pa	syment on a debt	you owed anyone	who was an insider?
corp ager	orations of whic	h you are ar for a busine	n office ess you	r, director, per:	son in control, (or owner of 20% or	more of their voting	ch you are a general partner; g securities; and any managing or domestic support obligations,
Ø.								
€mal Y	es. List all payr	nents to an i	insider	•	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name				*	\$	\$	
	Number Street	······································						
	City		State	ZIP Code				
		******				\$	\$	
	Insider's Name Number Street							
	***************************************			····	**************************************			
	City		State	ZIP Code				
an in	sider?					payments or trans	fer any property o	n account of a debt that benefited
Ø N					an insider.			
Le Ye	es. List all paym	ents that be	nefited	an insider.	Dates of	Total amount	Amazoni atili	Daniel Could
					payment	paid	owe	Reason for this payment include creditor's name
į	Insider's Name	- darmen an analysis of the state of the sta				\$	\$	
ī	Number Street		····					
-	City		State	ZIP Code	**************************************			
						•		
1	nsider's Name					\$	\$	
ñ	Number Street			-	VACCAMINATE OF THE STATE OF THE			

ā	City		State	ZIP Code				

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btor 1	Heather First Name Mide	L. de Name Last Name	Smith	Case number (if know	n)	
		Lauritage				
Pant 4		Actions, Repossessi				
List a	in 1 year before you ill such matters, inclu contract disputes.	u filed for bankruptcy, we uding personal injury case	ere you a party in any s, small claims actions	y lawsuit, court action, or adm s, divorces, collection suits, pate	inistrative proc rnity actions, su	ceeding? pport or custody modificatio
M M						
☐ Y	es. Fill in the details.					
		Nati	ire of the case	Court or agency		Status of the case
(Case title			Court Name		Pending
				Court Hains		On appeal
-				Number Street		Concluded
(Case number			City Sta	le ZIP Code	· · · · · · · · · · · · · · · · · · ·
C	Case title			Court Name	***************************************	Pending
_						On appeal
_				Number Street		Concluded
	Case number	The state of the s		City Stat	e ZIP Code	···
	es. Fill in the informat	aon below.	Describe the prop	erty	Date	Value of the property
	Creditor's Name		мадаау		H	<u> </u>
	Number Street		 Explain what happ	pened		
			Property was	s repossessed.		
	***************************************		Property was			
	City	State ZIP Code	Property wasProperty was	s garnished. s attached, seized, or levied.		
	Ony	State ZIF COUR	Describe the prope			
			Describe trie prope	erty	Date	Value of the property
			10 000			\$
	Creditor's Name					
	Number Street		Explain what happe	ened		
	William		_ Property was	repossessed.		
			Property was			
	City	State ZIP Code	Property was			
			Property was	attached, seized, or levied.		

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1	Heather First Name	Middle Name	La	Smith ast Name	Case number (if known)	
Vithi	in 90 days befo	ore you file	d for bankr	ruptcy, did any creditor, includi	ing a bank or financial institu	ution, set off any a	mounts from your
CCO	unts or retuse	to make a	payment b	ecause you owed a debt?		,	,
ZÍ N	lo 'es. Fill in the de	stoile.					
i (es. Fill itt the de	alans.					
				Describe the action the credit	tor took	Date action	Amount
Cr	reditor's Name		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	*************************************		was taken	
Nu	umber Street			······································		***************************************	\$
Cit	ty	Stat	e ZIP Code	Last 4 digits of account num	ber: XXXX		
				•		-	
/ithii	n 1 year before	you filed	for bankrup	otcy, was any of your property	in the possession of an assi	anee for the bene	it of
redit	tors, a court-a	pointed re	eceiver, a c	ustodian, or another official?	•		
No							
l Ye	es						
5:	List Certain	n Gi64	d Causais	and to wa			
	List Certain	II GIIIS AI	iu Contrib	utions			
ithin	n 2 years before	e you filed	for bankru	ptcy, did you give any gifts wit	h a total value of more than	\$600 per person?	
No)			ptcy, did you give any gifts witi	h a total value of more than	\$600 per person?	
No	n 2 years before o es. Fill in the det			ptcy, did you give any gifts wit	h a total value of more than	\$600 per person?	
No Ye	o es. Fill in the def	tails for eac	h gift.		h a total value of more than	\$600 per person?	
No Ye G)	tails for eac	h gift.	ptcy, did you give any gifts with	h a total value of more than	Dates you gave	Value
No Ye G	o es. Fill in the det Sifts with a total v	tails for eac	h gift.		h a total value of more than		Value
No Ye G	o es. Fill in the det Sifts with a total v	tails for eac	h gift.		h a total value of more than	Dates you gave	
No Ye G	o es. Fill in the det Sifts with a total v	tails for eac	h gift.		h a total value of more than	Dates you gave	Value \$
No Ye G	o es. Fill in the del Sifts with a total v er person	tails for eac	h gift.		h a total value of more than	Dates you gave	
No Ye G	o es. Fill in the del Sifts with a total v er person	tails for eac	h gift.		h a total value of more than	Dates you gave	
No.	os. Fill in the del	tails for eac	h gift.		h a total value of more than	Dates you gave	
No.	o es. Fill in the del Sifts with a total v er person	tails for eac	h gift.		h a total value of more than	Dates you gave	
No.	os. Fill in the del Sifts with a total ver person son to Whom You G	tails for eac	ch gift.		h a total value of more than	Dates you gave	
Peri	es. Fill in the del	tails for eac	h gift.		h a total value of more than	Dates you gave	
Peri	os. Fill in the del Sifts with a total ver person son to Whom You G	tails for eac	ch gift.		h a total value of more than	Dates you gave	
Peri	es. Fill in the del	value of mor	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave	
Pen City Per	es. Fill in the del	value of mor	re than \$600 ZIP Code		h a total value of more than	Dates you gave the gifts	
Pen City Per	es. Fill in the del	value of mor	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$
Peri	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$
Peri	es. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$
Peri	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$
Peri	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$
Peri	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$
Pers	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$
Pers	cs. Fill in the del	value of more	re than \$600 ZIP Code	Describe the gifts	h a total value of more than	Dates you gave the gifts	\$ \$

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ebtor 1	Heather First Name	Middle Name	L. Last	Smith Name	Case number (# known)		
. Wit	hin 2 years befo	re you file	d for bankrup	otcy, did you give any gifts or c	ontributions with a total valu	e of more than \$6	800 to any charity?
Z							
	Yes. Fill in the de	etails for ea	ich gift or cont	ribution.			
	Gifts or contribu that total more ti		rities	Describe what you contributed		Date you contributed	Value
	Charity's Name	····					\$
			,				\$
	Number Street		mpenneme managemental unit unit unit unit un un est				
	City State	ZIP Code					
int G	List Certa	in Losse	\$				
le r	L	-					
	nın ı year beron aster, or gamblir		тог рапкгирт	cy or since you filed for bankru	ptcy, did you lose anything	because of theft,	fire, other
Ø	· · · · · · · · · · · · · · · · · · ·	•					
	No Yes. Fill in the de	tails.					
	Describe the pro how the loss occ		st and	Describe any insurance coverage Include the amount that insurance claims on line 33 of <i>Schedule A/B</i> :	has paid. List pending insurance	Date of your loss	Value of property lost
						And the Annual Control of the Annual Control	\$
		_					
ITI 7						en e	***************************************
you	consulted abou	ıt seeking i	bankruptcy o	cy, did you or anyone else actir r preparing a bankruptcy petition parers, or credit counseling agen	on?		to anyone
			- · · · · ·			a more whose i	
	001 Debtorco			Description and value of any pro	perty transferred	Date payment or transfer was made	Amount of paymer
	372 Summit			Credit Counseling Certific	ate		
	Number Street		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	_		10/27/2017	\$14.9
	Jersey City	NJ State	07306 ZIP Code			And the control of th	\$
	www.001debt	torcc.com					
	Domoo Man Hade th	o Dougraph 25	1-4-27-				

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			· · · · · · · · · · · · · · · · · · ·	Smith	Case number (if known)		
	First Name	Middle Name	Last	Name			
				Description and value of any pro-	perty transferred	Date payment or	Amount of
	Tania Stoxstel	1				transfer was made	
	Person Who Was Paid			Bankruptcy Petition Prepa	arer		
	1426 Douglas	Lane				10/01/2017	s <u> </u>
	Number Street						
			·····				\$
	Crete	IL	60417				
	City	State	ZIP Code				
	tstoxstell@yaho						
	Email or website addres	SS					
	Person Who Made the F	Payment, if N	lot You				
2 ⁄2 N □ Y	lo 'es. Fill in the detai	ils.		Description and value of any prop	erty transferred	Date payment or	Amount of payme
		····				transfer was made	
	Person Who Was Paid						
							\$
	Number Street						Y
	Number Street						\$
	City	State	ZIP Code				\$
Withing rans	city in 2 years before the condition of	you filed nary cou nsfers an transfers	for bankrup rse of your t d transfers m	otcy, did you sell, trade, or otherwoods business or financial affairs? nade as security (such as the grant we already listed on this statement.			\$
Vithi rans nclud o nd ∡ N	City in 2 years before to the condition of the condition	you filed nary cou nsfers an transfers	for bankrup rse of your t d transfers m	business or financial affairs? nade as security (such as the grant		ortgage on your prop	\$en property
Withing rans notice of the control o	City in 2 years before to the condition of the condition	you filed nary cou nsfers an transfers	for bankrup rse of your t d transfers m	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$
Withing rans of the control of the c	City in 2 years before the condition of	you filed nary cou nsfers an transfers	for bankrup rse of your t d transfers m	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$
Vithirans nclud N N Y	City in 2 years before years before or inferred in the ording the both outright traction include gifts and lowes. Fill in the details Person Who Received Times.	you filed nary cou nsfers an transfers	for bankrup rse of your t d transfers m	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$
Within crans notice of the control o	City in 2 years before years between the continuous grant of the continuous years and years of the continuous years yea	you filed nary counsfers an transfers	for bankrup rse of your t d transfers m that you hav	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$
Within trans notice to notice the control of the co	City in 2 years before to the control of the contr	you filed nary cou nsfers an transfers ls. state to you	for bankrup rse of your t d transfers m that you hav	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$
Within transcription of the control	City in 2 years before yiferred in the ordite both outright traction include gifts and lotes. Fill in the detail of the person who received Time with the control of the c	you filed nary cou nsfers an transfers ls. state to you	for bankrup rse of your t d transfers m that you hav	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$en property perty). Date transfer
Vithing rans of the control of the c	City in 2 years before to a ferred in the ording de both outright trace to include gifts and to include gifts and to es. Fill in the detail Person Who Received To Number Street City Person's relationship	you filed nary cou nsfers an transfers ls. state to you	for bankrup rse of your t d transfers m that you hav	business or financial affairs? nade as security (such as the grant e already listed on this statement. Description and value of property	ing of a security interest or many property of the control of the	ortgage on your prop	\$en property perty). Date transfer

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Debtor 1	Heather	L.	Smith	Case number (if ki	nown)	
	First Name	Middle Name	Last Name			
19. With	nin 10 years bef	ore you filed for b	ankruptcy, did you transfer any prope alled asset-protection devices.)	rty to a self-settled tru	st or similar device of	which you
521 1		(These are Often Ca	med asset-protection devices.)			
	No Yes. Fill in the de	etails				
			Description and value of the prop	erty transferred		Date transfer was made
						was made
t	Name of trust					
-			***************************************			
			y.			
Part 8:	List Certair	Financial Acc	ounts, instruments, Safe Deposit	Boxes, and Storag	e Units	
20. With	nin 1 year befor	e you filed for ban	kruptcy, were any financial accounts	or instruments held in	vour name, or for your	benefit.
clos	ed, sold, move	d, or transferred?			•	•
incli brok	ude checking, s (erage houses.	avings, money ma	arket, or other financial accounts; cert coperatives, associations, and other fi	ificates of deposit; sha	ares in banks, credit ur	nions,
Ø,		position, partico, oc	poporumito, associations, una other m	nanciai matitutiona.		
Q	es. Fill in the d	etails.				
			Last 4 digits of account number	Type of account or	Date account was	Last balance before
			·	instrument	closed, sold, moved, or transferred	closing or transfer
	Name of Financial I	nstitution		П		
			XXXX	Checking Savings	W	\$
	Number Street			☐ Money market		
				Brokerage		
	City	State ZIP Co	de	Other		
			xxxx-	Checking		\$
	Name of Financial In	nstitution		☐ Savings		*
	Number Street			☐ Money market		
		·	W Marine, riseria	☐ Brokerage		
				Other		
1	City	State ZIP Co	de			
21. Do y	ou now have, o	r did you have wit	hin 1 year before you filed for bankrup	tcy, any safe deposit l	box or other depository	for
secu Marin		other valuables?				
	es. Fill in the d	etails.				
			Who else had access to it?	Describe the	e contents	Do you still have it?
						Q No
i	Name of Financial In	stitution	Name			Q Yes
i	Number Street	······································	Number Street	THE THE THIRD AND A SECOND SEC		
	······································		- Tarresson (1) (1) (1) (1)			
_		****	City State ZIP Code			

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tor 1	Heather			Smith	Cas	se number (if known)	
	First Name	Middle Name	Last Name				
Java v							
Tave y	ou storea prop	eny in a stor	age unit or place	e other than your he	ome within 1 year	before you filed for bank	ruptcy?
	s. Fill in the de	tails.					
			Who	else has or had acces	s to it?	Describe the contents	Do you sti
							have it?
_							□ No
ì	Name of Storage Fac	cility	Name				Yes
7	Number Street	T			· · · · · · · · · · · · · · · · · · ·		
v	Adminer Street		Numb	per Street			
-			CitySi	tate ZIP Code			
ō	City	State Zi	IP Code				
	-						
art 9:	identify i	Property Yo	u Hold or Cont	troi for Someone	Else		
Do vo	ou hold or contr	rol any propei	rty that someone	e else owns? Inclur	ie any nronerty v	ou borrowed from, are sto	ring for
	ld in trust for s			2 0.00 0 000.00	ic any property y	ou borroweu from, are sto	ing ioi,
Ø No	0						
Q Ye	s. Fill in the de	etails.					
			Where	is the property?		Describe the property	Value
	Owner's Name						\$
C							Ψ
_			Number	Street			V
_	lumber Street		Number	Street			P
_				Street			▼
Ñ		State Zi	Number City	Street	te ZIP Code		*
- - -	lumber Street		City P Code	Sta	ite ZIP Code		▼
	iumber Street Sity Give Dets	alis About E	P Code City	Sta	ite ZIP Code	THE PROPERTY CONTROL OF THE PROPERTY OF THE PR	
o Trace 110.	lumber Street City Give Deta	alls About E	P Code City in Vironmental ving definitions a	Sta Information apply:	MANAGE A CONSTRUCTION OF THE CONSTRUCTION OF T		
r the p Environ	Give Data urpose of Part onmental law m dous or toxic s	10, the follow neans any fed ubstances, w	invironmental ring definitions aleral, state, or materia	Information apply: cal statute or regula	ation concerning	pollution, contamination, er, groundwater, or other , or material.	releases of
the p Environmental	Give Deta urpose of Part onmental law m dous or toxic s ting statutes or	10, the follow neans any fed ubstances, w	P Code City Invironmental ring definitions a leral, state, or locastes, or materia controlling the c	Information apply: cal statute or regula al into the air, land, leanup of these sub	ation concerning soil, surface wat ostances, wastes	er, groundwater, or other , or material.	releases of medium,
the p Environmental the control of t	Give Deta curpose of Part conmental law madous or toxic sting statutes or neans any locat	10, the followneans any fed ubstances, we regulations cition, facility, o	invironmental ving definitions a leral, state, or locastes, or materia controlling the cor	Information apply: cal statute or regula al into the air, land, leanup of these sub	ation concerning soil, surface wat ostances, wastes vironmental law,	er, groundwater, or other	releases of medium,
the p Environmental of the control o	Give Data Give Data urpose of Part onmental law m dous or toxic s ting statutes or neans any locat it or used to or dous material r	10, the follow neans any fed ubstances, w regulations of tion, facility, o wn, operate, of means anythin	invironmental ring definitions a deral, state, or locastes, or materia controlling the corr property as de or utilize it, incluing an environme	Information apply: cal statute or regula al into the air, land, eleanup of these sub efined under any en uding disposal sites ental law defines as	ation concerning soil, surface wat ostances, wastes vironmental law,	er, groundwater, or other , or material.	releases of medium, perate, or
the p Environmental of the control o	Give Data Give Data urpose of Part onmental law m dous or toxic s ting statutes or neans any locat it or used to or dous material r	10, the follow neans any fed ubstances, w regulations of tion, facility, o wn, operate, of means anythin	invironmental ring definitions a deral, state, or locastes, or materia controlling the corr property as de or utilize it, incluing an environme	Information apply: cal statute or regula al into the air, land, cleanup of these sub	ation concerning soil, surface wat ostances, wastes vironmental law,	er, groundwater, or other , or material. whether you now own, op	releases of medium, perate, or
the present of the pr	Give Deta curpose of Part commental law madous or toxic sting statutes or neans any locate it or used to or dous material rance, hazardou	10, the followneans any fed ubstances, we regulations of the conference of the confe	invironmental ving definitions a deral, state, or locastes, or materia controlling the cor property as de or utilize it, incluing an environmental	Information apply: cal statute or regula al into the air, land, eleanup of these sub efined under any en uding disposal sites ental law defines as	ation concerning soil, surface wat ostances, wastes vironmental law, a hazardous was m.	er, groundwater, or other , or material. whether you now own, op ste, hazardous substance,	releases of medium, perate, or
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Debtor 1	Heather	L.	Smith	Case number (# known)	
	r ust warne	Middle Name	Last Name		
or Have	a kan salifad s				
25. Hav		ny governmental un	it of any release of hazardous mater	ial?	
	No Yes. Fill in the o	intalia			
-	ies. Fili ili ilie (ætans.	C		
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit	•	***************************************
	Number Street		Number Street	-	
			City State ZIP Code	-	
	City	State ZIP Code	-		
	-				
26. Have	you been a pa	rty in any judicial or	administrative proceeding under an	y environmental law? Include settlements	and orders.
42 N	40				
QY	es. Fill in the d	etails.			
			Court or agency	Nature of the case	Status of the
С	ase title				case
	***************************************		Court Name	PT-000444	Q Pending
					On appeal
			Number Street		Concluded
č	ase number				
			City State ZIP Cod	e	
Part 11	Give Det	olie Abant Vaur B	usiness or Connections to Any	B	
zz. Withi					
C	A sole propri	etor or self-employed	d in a trade, profession, or other act	ive any of the following connections to any	business?
	A member of	a limited liability cor	mpany (LLC) or limited liability partr	ershin (I I P)	
٠	A partner in a	partnership		,	
			executive of a corporation		
	An owner of a	it least 5% of the vot	ing or equity securities of a corpora	tion	
Ø N∈	o. None of the a	bove applies. Go to	Part 12.		
Q Ye	es. Check all th	at apply above and fi	ill in the details below for each busi	1 0 \$\$.	
			Describe the nature of the business	Employer Identification num	nber
Ē	Business Name		_	Do not include Social Secu	rity number or ITIN.
_				EIN:	
V	lumber Street		_		
_			Name of accountant or bookkeeper	Dates business existed	
			_	From To	
ā	lity	State ZIP Code	nous	110111	
			Describe the nature of the business	Employer Identification num	ber
B	iusiness Name	***************************************	•••	Do not include Social Secur	
				eiki.	
N	umber Street		- Manua of account of	EIN:	
			Name of accountant or bookkeeper	Dates business existed	
			-	_	
či	ity	State ZIP Code	-	From To	

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ebtor 1	Heather First Name	L.		Smith	Case number (if known)
	riist Name	Middle Name	Last Name			
			Dago	ribe the nature of the bu	atuana	Employer Identification number
	Business Name		Desc	tibe the nature of the bu	siness	Do not include Social Security number or ITIN.
	business name					EIN:
	Number Street		Name	of accountant or book	raanar	Dates business existed
				o do	.cope.	nates pusitess existen
						From To
	City	State ZIP	Code			10
28. With	nin 2 years befor	e you filed for I	bankruptev, did	vou give a financial s	statement to anyone abo	out your business? Include all financial
inst	itutions, credito	rs, or other par	ties.	,		out your business. Include all illiancial
Ø i						
L	Yes. Fill in the de	etails below.				
			Date i	ssued		
	Name		MM / D	D / YYYY		
	Number Street					

	City	State ZIP	Code			
	wity	State Zir	Code			
Part 12	3 Sign Belov	W				
l ha	ive read the ans	wers on this St	atement of Fina	ncial Affairs and any	attachments, and I decl	are under penalty of perjury that the
ans	swers are true ar	na correct i una	derstand that m	aking a false stateme	nt, concealing property), or imprisonment for u	or obtaining money or property by fraud
18	U.S.C. §§ 152, 13	341, 1519, and 3	571.		, or imprisonment for a	p to 20 years, or boars.
	-20	0	ſ			
X	W. K	· lot	j	X		
	Signature of Debto	orts .		Signature of I	Debtor 2	- 10-P000000000
	Date 12/26/	/ a.e.i⊃				
	, ,		Varir Ctataman	Date		Bankruptcy (Official Form 107)?
Ø		donai pages to	rour Statemen	t OI FINANCIAI AMAIRS 1	or individuals Filing for	Bankruptcy (Official Form 107)?
	No Yes					
Did	you pay or agre	e to pay someo	ne who is not a	n attorney to help vo	u fill out bankruptcy for	ms?
	No			, ,		
Ø.	Yes. Name of per	_{son} Tania Sto	exstell		Attach (the Bankruptcy Petition Preparer's Notice,
					Declar	ation, and Signature (Official Form 119).

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Fill in this in	formation to ide	itify your case:		
Debtor 1	Heather First Name	L. Middle Name	Smith Last Name	
Debtor 2 (Spouse, if filing)	Charles and the control of the contr	***************************************		
		Middle Name	Last Name	
	sankruptcy Court for	the: Northern District of	Illinois	
Case number (If known)			***************************************	🗖 Check i
				amende

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 18

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Scholinformation below.	edule D: C	reditors Who Have Claims Secured by Property (Off	cial Form 106D), fill in the
Identify the creditor and the property that is collate	eral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's name: Capital One Finance		Surrender the property.	□ No
		Retain the property and redeem it.	☑ Yes
Description of 2004 Dodge Caravan property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	Constitution of the second
		Retain the property and [explain]:	
		· · · · · · · · · · · · · · · · · · ·	_
Creditor's name:		☐ Surrender the property.	☐ No
Description of		Retain the property and redeem it.	☐ Yes
property securing debt:	å	Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	
Creditor's			-
name:		Surrender the property.	□ No
Description of		Retain the property and redeem it.	Yes
property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	
Creditor's			•
name:		Surrender the property.	☐ No
Description of		Retain the property and redeem it.	☐ Yes
property securing debt:		Retain the property and enter into a Reaffirmation Agreement.	
		Retain the property and [explain]:	

12/15

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Document Page 55 of 55 Heather Smith Debtor 1 Case number (If known) Part 2 **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 2

MM / DD / YYYY